



Keeping New Jersey Healthy



First Lady Mary Pat Christie talks about the Administration's commitment to helping those affected by autism.

## New Jersey Continues to Lead on Autism Research

By Mary E. O'Dowd, MPH, Commissioner  
New Jersey Department of Health



Last week, I joined First Lady Mary Pat Christie to announce \$4.4 million in grants to establish Autism Medical Homes and advance research in the understanding, prevention, evaluation and treatment of the biologically-based disorder. This new funding builds upon the Christie administration's firm commitment to finding new and innovative ways to help New Jersey families impacted by autism. New Jersey is a national leader in early intervention and education of children with autism, which affects about 1 in 45 children across the Garden State.

Mrs. Christie and I were joined by parents, hospital officials, autism care providers, and members of the Governor's Council for Medical Research and Treatment of Autism for the announcement.

A total of \$1.2 million is being awarded for autism medical homes to be established in Children's Specialized Hospital in Mountainside, Hackensack University Medical Center in Hackensack and Jersey Shore University Medical Center in Neptune. Each of the hospitals will receive approximately \$400,000 over two years.

In addition, eight other research grants are being awarded to medical schools and universities for clinical and translational research projects including development of early markers of Autism Spectrum Disorder (ASD) and a study examining how diverse populations with an autism diagnosis link to services.

Mrs. Christie and I made this announcement at Meridian Health's Jersey Shore University Medical Center in Neptune. While we were at the hospital, Mrs. Christie and I met with families affected by autism. These parents talked about the struggles they have encountered in ensuring their children receive all-inclusive care. They were excited that these new medical homes will be created to better serve families. They also praised the Early Intervention program for its support of their children.

During the event, Mrs. Christie talked about her commitment to create greater awareness around autism in our state and support parents who want to help their children lead productive and full lives.

The three Autism Medical Homes pilot projects are designed to improve health outcomes for children with ASD. They focus on reducing unmet needs for specialty services by bringing together primary care providers, subspecialists and ASD providers to treat the whole person. The project's goal is to improve the quality of and access to services along the continuum of care.

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Meridian CEO John Lloyd, First Lady Mary Pat Christie and Commissioner O'Dowd

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## Commissioner O'Dowd Announces Departure

*Cathleen Bennett, Director of Policy and Strategic Planning, to become Acting Commissioner*



Commissioner Mary E. O'Dowd

*"I am confident that the Department will continue to excel under the leadership of Cathy Bennett," said Commissioner O'Dowd.*



Cathleen Bennett, the Department's Director of Policy and Strategic Planning, will become acting commissioner.

On June 22, Governor Chris Christie announced changes in his cabinet, including the departure of Commissioner O'Dowd later this summer.

Mary E. O'Dowd first joined the Department of Health in January 2008 as Chief of Staff, subsequently serving as Deputy Commissioner for a year prior to becoming Commissioner in April 2011. During her tenure, she has been responsible for a staff of more than 1,200 and a budget of \$1.9 billion.

O'Dowd's leadership of the Department coincided with extraordinary transformation in the healthcare delivery system in New Jersey. Under her leadership, the Department invested in the healthcare safety net and health information technology, implemented new financial strategies designed to promote quality of care, transitioned senior services programs into the Department of Human Services and championed public health initiatives to enhance population health.

Furthermore, O'Dowd's efforts to improve pregnancy outcomes and health early in life has resulted in a statewide effort to better coordinate health and social services programs, an expansion of the Newborn Screening program, and increased breastfeeding rates as part of a broader obesity prevention program. She also made it a priority to improve the quality of care at the end of life by promoting the need for individuals to discuss their care preferences with their loved ones and health care providers.

O'Dowd led the Department's response and recovery efforts during a number of unprecedented emergent events including: Hurricane Irene, Superstorm Sandy and the West African Ebola epidemic.

"It has been an honor to serve the state of New Jersey for the last seven years while leading the extraordinarily talented workforce at the Department of Health," Commissioner O'Dowd said. "I believe our collective efforts have led to empowering individuals and communities to improve their health and quality of life now and in the future."

Governor Christie nominated O'Dowd to the Board of Directors for Horizon Blue Cross Blue Shield of New Jersey and the Senate approved her nomination on June 29. She will assume that role after her departure.

Cathleen Bennett, the Department's Director of Policy and Strategic Planning, will become acting commissioner. Bennett joined the Department as Director of Policy and Strategic Planning in August 2010.

Bennett has directed strategic public health and healthcare delivery initiatives including healthcare quality assessment, health statistics and informatics, population health and health equity, regional health planning, and health information technology. Prior to joining the Department, Bennett worked as an executive in the private sector, providing consulting, strategy, and management services to federal and state health and human services agencies. Bennett holds a Master of Government Administration from the University of Pennsylvania, a Juris Doctorate from The Dickinson School of Law, and a Bachelor of Arts from Villanova University.

## What's the difference between Ebola and Lassa fever?

Although Lassa fever can produce hemorrhagic symptoms in infected people, the disease is different from Ebola, which is responsible for the current outbreak in West Africa. In general, Lassa fever is less likely to be deadly than Ebola (approximately 1% death rate vs approximately 70% death rate without treatment) and less likely to be spread from person to person.

## What is the death rate for Lassa fever and how easy is it to get?

The death rate for untreated Lassa is 1%. In West Africa, Lassa virus is carried by rodents and transmitted to humans through contact with urine or droppings of infected rodents. In rare cases it can be transmitted from person to person through direct contact with a sick person's blood or bodily fluids, through mucous membrane, or through sexual contact. The virus is not transmitted through casual contact.

## DOH & Its Partners Manage Lassa Fever, Measles and Anthrax—In the Same Week

Every public health emergency presents its own unique set of challenges. Recently, the Department and its partners in health care and public health successfully managed three investigations in the same week—a Lassa Fever death, a measles case and notification from the U.S. Department of Defense that live anthrax had been inadvertently shipped to labs in New Jersey and several other states. All these events began over the Memorial Day weekend.

An Essex County resident who spent several weeks in Liberia tested positive for Lassa Fever. The individual was first treated at Saint Barnabas Medical Center in Livingston and later died on May 25 in University Hospital in Newark. More than 200 family members and staff from two hospitals who had contact with the patient were identified, notified and monitored for 21 days—with no secondary cases. The New Jersey case was the sixth known occurrence of Lassa fever in travelers returning to the United States since 1969, not including two recovering patients. It was the second case in the Garden State in the past decade.

On May 28, the Department of Health identified a person confirmed to have measles who may have exposed people at a funeral home in Middlesex County on May 11 and 14. Contacts were identified so they could monitor themselves for possible symptoms.

The CDC also notified the Department that week about the inadvertent shipment of anthrax from the U.S. Army's Dugway Proving Ground in Utah. The investigation has since expanded to include 69 labs in 19 states and five foreign countries. There was no risk to the public. A team of experts from the Departments of Health and Environmental Protection and the State Police Hazardous Materials Response Unit removed the sample in question from a commercial lab and shipped it to the CDC. No one from the lab got sick or was considered high risk.

These events were challenging. But, given the Department's experience over the years—from anthrax in 2001 to the worldwide H1N1 pandemic in 2009, Superstorm Sandy in 2012 and the ongoing response to the West African Ebola outbreak—public health and health care officials have learned to be flexible and apply emergency response experience to every new challenge.

### Lassa Fever Death:

<http://www.nj.gov/health/news/2015/approved/20150525a.html>

### Confirmed Measles Case:

<http://www.nj.gov/health/news/2015/approved/20150528a.html>

### Frequently Asked Questions About Measles:

<http://www.cdc.gov/measles/about/faqs.html>



Commissioner O'Dowd spoke about DOH's Sandy recovery programs at the Hope and Resilience Symposium.

## Commissioner O'Dowd Participates in Hope and Resilience Symposium

On June 5, Commissioner O'Dowd emphasized the Department's commitment to public health recovery at the Hope and Resilience Symposium. The symposium was a two-part series for healthcare professionals to learn new perspectives, tools, and techniques to deal effectively with individuals affected by Superstorm Sandy. The series was sponsored by the Department of Children and Families and Rutgers University Behavioral Health with support from the Department of Health.

The Commissioner remarked that "exposure to a disaster is among the most complex environmental contributors to poor health an individual or community can face. And while physical injuries are often easier to diagnosis and to track progress, recovery from emotional impacts is much harder to gauge." To address this, she added, "the Department has created a screening initiative at our hospitals and primary care physician offices to screen for mental and behavioral health issues, including depression, and domestic violence." To date, more than 30,000 people have been screened through this program.

The symposium was attended by more than 150 people who were privileged to listen to the three keynote speakers: Dr. Fredrick Frise, an internationally-recognized psychologist who has specialized in schizophrenia for more than forty years; Dr. James Kutsch, Jr, the President and Chief Executive Officer of the Seeing Eye in Morristown, NJ; and Dr. Kay Redfield Jamison, Professor of Psychiatry at Johns Hopkins University and author of the New York Times bestseller, *An Unquiet Mind*.

### ASSESSMENT REPORT ON QUALITY IMPROVEMENT READINESS



*On June 19, another class of DOH staff completed a report out on their Quality Improvement Projects.*

## Building a Quality Improvement Culture

Quality Improvement in Public Health has become a priority for the nation as well as the Department of Health. The Department's Division of Public Health Infrastructure and Emergency Preparedness recently completed a validated survey which evaluates readiness for building a QI culture. This survey provided data-driven information on ways to advance a culture of quality and offered an understanding of the drivers and barriers toward continuous QI.

The survey provided some interesting insights into QI Readiness. For example:

- ❖ Over 80% of survey respondents agree or strongly agree that spending time and resources on QI is worth the effort. Quality improvement activities are likely to be embraced by staff, if endorsed by managers and supervisors.
- ❖ The survey respondents indicate that basic QI methods are not routinely used to understand the root cause of problems.
- ❖ 13% of survey respondents stated that when trying to facilitate change, staff has the authority to work within and across program boundaries, indicating silos exist.

The best strategy for addressing challenges noted in the survey is to focus on employee empowerment, encourage career development and train in basic QI tools and change management principles. By giving staff the QI essentials to add to their toolkits and provide plenty of opportunities to practice QI—we build capacity. Our ultimate aim is to create a culture of continuous quality improvement that will eventually become invisibly woven into the fabric of our daily work.

# CHOOSE YOUR COVER



## Choose Your Cover Offers Free Skin Cancer Screenings

The Department reminds everyone this summer to take precautions to prevent sunburns that can lead to skin cancer. The Department's *Choose Your Cover* campaign brings free skin cancer screenings directly to people at parks, beaches and pools across New Jersey. Skin cancer is the most common cancer in the US. The American Cancer Society estimates that 73,870 cases of melanoma, the most serious form of skin cancer, will be diagnosed nationwide in 2015. An estimated 2,520 of those diagnoses will be in New Jersey.

"The rate of people getting melanoma has doubled over the last three decades," said Department of Health Commissioner Mary E. O'Dowd. "Everyone is at risk from overexposure to the sun. Young children especially need protection from the sun's ultraviolet (UV) rays." Sun smart precautions include using sunscreen with a SPF factor of at least 30 and wearing protective clothing, a wide-brimmed hat and sunglasses.

Twenty-six *Choose Your Cover* 2015 events were scheduled between late-April and mid-August. This year, the campaign, which began in 2008, will have screened more than 10,000 people.

On Saturday, July 18th seven beach events will be held from 10 a.m. – 2 p.m.:

- ❖ Belmar Beach, Ocean at 5th Avenue
- ❖ Bradley Beach, Brinley Avenue and Boardwalk
- ❖ Brick Beach III, 440 Rte. 35 North, Brick, NJ
- ❖ Island Beach State Park, Central Avenue, Seaside Park – 1st ocean beach
- ❖ Sea Bright Municipal Beach, 1099 Ocean Avenue
- ❖ Ship Bottom, Long Beach Island at 20th Street's beach end
- ❖ Asbury Park, 800 Ocean Avenue

For more information on *Choose Your Cover* visit:

<http://www.state.nj.us/health/ccp/> or <http://www.chooseyourcover.org/>.



Beachgoers sign up to be screened at *Choose Your Cover* event in Belmar.

## DOH Offers Summer Food Safety Tips

It's summer and the weather makes it the perfect time for an outdoor barbecue or picnic. But while warm weather is a perfect setting for outdoor eating, it also provides ideal growing conditions for bacteria that cause foodborne illness so it is important to take precautions.

### Packing, transporting and serving food:

- ❖ Wash your hands: Wash for at least 20 seconds in warm, soapy water before and after handling food.
- ❖ Keep cold food cold. Place in a cooler with ice or frozen gel packs. Cold food should be stored at 40°F or below.
- ❖ Don't cross-contaminate. Be sure to keep raw meat, poultry, and seafood securely wrapped to keep juices from contaminating other food.
- ❖ Cold food: Cold food should be kept at 40 degrees F or below until serving.
- ❖ Hot food: Hot food should be kept at or above 140 degrees. Any food left out for two hours or more should be discarded.

### Grilling Tips:

- ❖ Cook food thoroughly. Use a thermometer to be sure food is cooked thoroughly. Hamburgers should be cooked to at least 160 degrees F; chicken to 165 degrees F; and steaks, pork and fish to at least 145 degrees F.
- ❖ Don't reuse platters or utensils. Using the same platter that previously held raw food allows bacteria from food's juices to spread to cooked food.



## Community Outreach & Events

May-June 2015



Dr. Brito and Human Services Acting Commissioner Elizabeth Connolly at the Drug Monitoring Initiative Symposium at Kean University. Children and Families Commissioner Allison Blake, Commissioner O'Dowd and Acting Attorney General Hoffman also attended this symposium.



On June 18, Commissioner O'Dowd spoke at a Morris County Chamber of Commerce meeting. Pictured with the Commissioner: Richard Pitman, Fair Share Hospitals Collaborative, Madeline Ferraro, Atlantic Health System and Paul Boudreau, Morris County Chamber of Commerce.



Disease Intervention Specialists undergo phlebotomy training in response to a HIV outbreak in Indiana.

- May 6** Commissioner O'Dowd delivered a **presentation** at the New Jersey Business and Industry Association's Meet the Decision Makers breakfast.
- May 12** Commissioner O'Dowd spoke at the 11th Annual Women Caregivers Retreat in Hamilton.
- May 15** Commissioner O'Dowd attended the New Jersey Primary Care Association Women Health Advocates Breakfast in Trenton.
- June 1** Commissioner O'Dowd spoke about improvements in New Jersey's breastfeeding rates at the **Mother Baby Summit** at the New Jersey Hospital Association (NJHA).
- June 4** Dr. Brito presented on Pediatric Populations in New Jersey to residents and fellows at Rutgers, The State University-Department of Pediatrics in New Brunswick.
- June 11** Commissioner O'Dowd spoke at the Home Care Association of New Jersey annual conference in Atlantic City.
- June 18** Commissioner O'Dowd presented at the Morris County Chamber of Commerce in Whippany.
- June 24** Commissioner O'Dowd spoke at the NJHA Board Meeting.

## Two Disease Intervention Specialists Lend A Hand In Indiana

On March 26, 2015, Indiana Governor Pence declared a public health emergency due to an outbreak of HIV. In mid-April, Indiana issued an Emergency Management Assistance Compact (EMAC) request for Disease Intervention Specialists (DIS) with the unique ability to conduct phlebotomy, contact tracing and field investigation of infected patients and their sexual and needle sharing partners.

In response to Indiana's EMAC request, two Disease Intervention Specialists (DIS) from the Division of HIV, STD and TB Services, Valerie Tucker-Trower and Louis Sorrentino, were deployed to Indiana from May 3 – 19, 2015 to assist the Indiana Health Department.

As reported by the CDC, "approximately 159 cases of HIV in rural south eastern Indiana were identified in December of 2014. In a community of 4,200 people; 84% were also HCV infected. Of all persons evaluated and interviewed, 96% are injection drug users." In a community that normally sees less than 5 HIV cases per year, the outbreak was first identified by a local DIS. Field investigations; patient interviewing; day and night clinic hours; phlebotomy in the community and jail; door to door blitzes, traveling with the needle exchange van; transporting patients to the clinic for services; and addressing the social needs of this community were just some of the services the DIS provided that led to long working days. Their dedication and unique skill-set enabled them to significantly contribute to the Indiana outbreak and demonstrates that they could readily address similar situations within the state of New Jersey.



Commissioner O'Dowd talks about DOH's efforts to improve and expand autism research

### Commissioner's Message, *continued from page 1*

Having all medical care and treatment services coordinated through medical homes will improve the health of children with autism and reduce the stress on these families. These pilot projects and research grants will build on the work this Administration has done to broaden autism research, create an Autism Center of Excellence at Montclair State University and translate scientific knowledge into improved care and services for children with ASD and their families.

The eight research grant awards are:

- ❖ \$398,050 to Rowan University in Glassboro to evaluate Applied Behavior Analysis interventions on communication in preschool children with autism using SMART Treatment Design;
- ❖ \$384,382 to Rutgers University, Biomedical and Health Sciences in New Brunswick to research the experiences of diverse families of children newly diagnosed with ASD;
- ❖ \$398,319 to Rutgers University, Biomedical and Health Science in New Brunswick for development of early markers of ASD;
- ❖ \$385,838 to Rutgers University in Piscataway for bridging the gap between behavior and genetics in individuals with ASD through the detection of micro-movements in social behavior with the potential of leading to earlier diagnosis of ASD;
- ❖ \$400,000 to Rutgers University Biomedical and Health Sciences in Piscataway to study human stem cells from individuals with autism to identify neurobiological pathways that contribute to idiopathic autism;
- ❖ \$400,000 to Rutgers University, Human Genetics Institute in Piscataway to identify specific genetic changes that increase risk for ASDs by using clinical data and DNA from families in affected by ASD;
- ❖ \$399,972 to Rowan University-School of Osteopathic Medicine in Stratford to understand how Bisphenol A can affect metabolism in some children with ASD and their mothers;
- ❖ \$400,000 to Rutgers Biomedical and Health Sciences (RBHS) in Piscataway for a treatment trial to confirm phenotypic improvement with sulforaphane treatment in a population of individuals with autism



Meridian CEO John Lloyd, First Lady Mary Pat Christie and Commissioner O'Dowd meet with families affected by autism.

New Jersey is at the forefront of supporting autism research through the Governor's Council for Medical Research and Treatment of Autism, which has provided more than \$35 million in research grants since 2008. In the last four years DOH has created a Center for Excellence located at Montclair State University and broadened the type of research funded with a focus on translation into improved care.

In addition to the grants announced last week, the Governor's fiscal year 2016 budget provides \$154 million for the Department of Health's Early Intervention System, which provides early identification and referral, service coordination, evaluation/assessment, and developmental early intervention services for children from birth to three with developmental delays and disabilities.

For more information on the Autism Medical Home pilot projects, visit [http://www.state.nj.us/health/autism/grant\\_ini.shtml](http://www.state.nj.us/health/autism/grant_ini.shtml)

'Cancer Matters'  
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Cancer Institute  
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## Congratulations to the New Jersey State Cancer Registry

The New Jersey State Cancer Registry (NJSCR), under the direction of Rutgers Cancer Institute of New Jersey and the state Department of Health, has taken first place as one of only three Surveillance, Epidemiology, and End Results (SEER) Program cancer registries in the nation to meet all 14 data quality indicators for excellence. SEER Program registries are considered to be the most authoritative source of information on cancer incidence and survival in the United States. The NJSCR is one of only 10 statewide SEER Program registries in the country and has been providing population-based incidence data from New Jersey to the SEER Program for more than three decades.

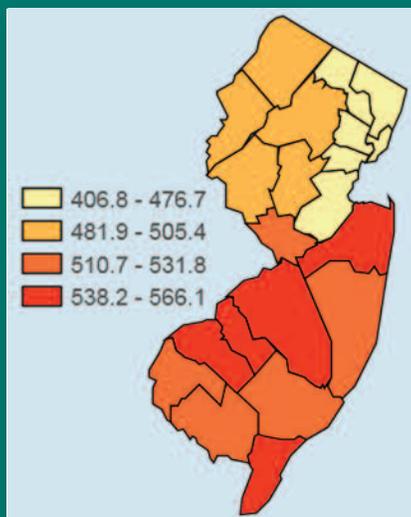
The NJSCR is an important source of information for health care providers, public health officials and administrators. The information it contains is widely used by clinicians, scientists, and researchers. Data on cancer patterns in the population can be very useful for preventing and controlling cancer and improving treatment and patient care.

The data are also used to respond to questions from New Jersey residents on cancer issues and concerns. In addition, incidence rates in New Jersey are shared with the federal Centers for Disease Control and Prevention and the National Cancer Institute for analyses including comparison with other states and the nation. The data collected by the NJSCR can be useful for describing cancer patterns in the population, discovering causes of cancer, planning programs for people affected with cancer, and other related research.

"This is a significant achievement and is a testament to the commitment and dedication of many people including cancer registrars, physicians, pathologists, hospital executives, and administrative and technological support staff at the New Jersey Department of Health and Rutgers Cancer Institute of New Jersey. We are also the second largest of the state registries in the SEER Program – second only to California with more than 50,000 cases per year – making this achievement much more impressive," notes NJSCR director Antoinette Stroup, PhD, who is a resident member of the Cancer Institute of New Jersey. "Receiving top honors by the SEER Program was also made possible by the funding support of the State of New Jersey, the National Cancer Institute, and the Centers for Disease Control and Prevention. This combined support provided the NJSCR with the necessary resources to ensure timely and complete cancer reporting across the state of New Jersey."



Antoinette Stroup, PhD, director, New Jersey State Cancer Registry.



Age-Adjusted Invasive Cancer Incidence Rates in New Jersey 2008-2012